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REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
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Application Number	10/707,990
Filing Date	January 30, 2004
First Named Inventor	Sellergren
Art Unit	1854
Examiner Name	Kosar
Attorney Docket Number	74239

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

all the attorneys/agents of record.
 the attorneys/agents (with registration numbers) listed on the attached paper(s), or
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The reasons for this request are: Leaving the employ of Customer No. 26288

CORRESPONDENCE ADDRESS

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Signature	Olivia Tolan		
Name	Olivia Tolan	Registration No.	45,161
Date	June 29, 2006	Telephone No.	

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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